

# Attending Provider

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## Policy and reporting requirements for the attending provider

Policy: [Michigan Medicaid Provider](#) Manual Chapter Billing and Reimbursement for Institutional Providers Section 2.3.B Attending Provider

[MSA 12-55](#); [MSA 13-17](#); [MSA 17-04](#)

For all institutional claims with the exception of hospital owned ambulances the individual type 1 NPI for the attending provider must be reported on the claim. If the attending is not reported, is not enrolled or does not have an active enrollment in Michigan Medicaid on the date of service the claim will be denied. Providers are encouraged to utilize the Provider Verification Tool within the [My Inbox](#) tab in CHAMPS to verify enrollment.

Attending providers must be one of the following practitioner types, acting within their scope of practice under State law and MDHHS Medicaid policy requirements:

- Physician
- Nurse Practitioner
- Certified Nurse Midwife
- Physician Assistant
- Dental/Oral Surgeon
- Optometrist
- Podiatrist

Claims denied for the attending provider can be identified with the following CARC and RARCS:

CARC B7 RARC M143- The provider is not certified/eligible to be paid for this procedure/service on this date of service

Is the provider enrolled in CHAMPS?

Is the provider's enrollment active for the dates of service being billed?

CARC 183 RARC N767 or N574- The provider is not eligible to bill for the services

Is the NPI reported the individual/type 1 NPI?

Is the provider one of the allowed practitioner types?

CARC 16 RARC N253- Missing/Incomplete/Invalid attending provider

Is there an attending NPI reported on the claim?

Changes or corrections to the providers enrollment have to be completed within the CHAMPS provider enrollment subsystem.